

CA 2089084

Amounts may be rounded to whole dollars.

496 Independent Expenditure Report

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 Received
 Oxnard City Clerk

NAME OF FILER Friends of CAUSE Action Fund		Date of This Filing 10/14/2016	Date Stamp 2016 OCT 14 PM City of Oxnard	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (805) 922-4447	I.D. NUMBER (if applicable) 1279696	Report No. LIEFLORES1	805 385 7806	
STREET ADDRESS 2021 Sperry Avenue, Suite 9		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Ventura	STATE CA	ZIP CODE 93003	No. of Pages 1	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Genevieve Flores-Haro				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: City of Oxnard	DISTRICT NO.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/14/2016	Ground Campaign Cumulative to date total \$3383.86	3,383.86

Reason for Amendment: _____

3861 KAY